

# COMBINED DECLARATION AND POWER OF ATTORNEY

	As a below named inventor, I hereby declare that:							
	TYPE OF DECLARATION							
	This declaration is of the following type:							
promoted that and the that half		2 original						
		design						
		supple	mental					
		divisio	nal					
		contin	uation					
W W		contin	uation-in-part (CIP)					
Und Sout Sout Sout State	INVENTORSHIP IDENTIFICATION  My residence, post office address and citizenship are as stated below next to my name, I believe I a the original, first and sole inventor (if only one name is listed below) or an original, first and joi inventor (if plural names are listed below) of the subject matter which is claimed and for which are patent is sought on the invention entitled:  PIPELINE CONTROLLER FOR PROVIDING INDEPENDENT EXECUTION BETWEEN THE PRELIMINARY AND ADVANCED STAGES OF A SYNCHRONOUS PIPELINE							
SPECIFICATION IDENTIFICATION  the specification of which: (complete (a) or (b))								
	(a)	$\overline{\mathbf{Q}}$	is attached hereto.					
	(b) or □	☐ Expres	was filed on as					



### ACKNOWLEDGMENT OF REVIEW OF PAPERS AND DUTY OF CANDOR

I hereby state that I reviewed and understand the contents of the above identified specification, including the claims, as amended by an amendment referred to above.

I acknowledge the duty to disclose information

- which is material to patentability as defined in 37, Code of Federal Regulations, § 1.56
- and which is material to the examination of this application, namely, information where
  there is a substantial likelihood that a reasonable examiner would consider it important in
  deciding whether to allow the application to issue as a patent, and
- ☐ In compliance with this duty there is attached an information disclosure statement in accordance with 37 CFR § 1.98.

#### **POWER OF ATTORNEY**

I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith.

<u>Name</u>	<u>Title</u>	Registration Number
Beth L. McMahon	Attorney	41,987
Charles A. Johnson	Attorney	20,852
Mark T. Starr	Attorney	28,762

SEND CORRESPONDENCE TO

DIRECT TELEPHONE CALLS TO: (Name and telephone number)

Unisys Corporation Attn: Beth L. McMahon M.S. 4773 P O Box 64942 St. Paul, MN 55164-0942

Beth L. McMahon (651) 635-7893

#### DECLARATION

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

# **SIGNATURES**

## **FULL NAME OF FIRST INVENTOR:**

Thomas (Given Name)	<b>D.</b> (Middle Initial or Name)	Hartnett (Family or Last Name	) )
Inventor's Signature)	A.	December Zo	
Country of Citizenship: <u>U</u>	U <u>SA</u>		
Residence: 2560Dunlap S	Street, Roseville (Ramsey Cour	ty), Minnesota 55113	
Post Office Address: <u>2560</u>	Dunlap Street, Roseville (Ram	sey County), Minnesota 551	<u>13</u>
FULL NAME OF SECO	OND INVENTOR:		
John (Given Name)	S. (Middle Initial or Name)	Kuslak (Family or Last Name	<del>,</del>
John J	). Kuslah	December 7	, 1999
(Intentor's Signature)		(Du	:5)

Country of Citizenship: <u>USA</u>

Residence: 758 – 97<sup>th</sup> Avenue Northeast, Blaine (Anoka County), Minnesota 55434

Post Office Address: 758 – 97th Avenue Northeast, Blaine (Anoka County), Minnesota 55434

## **SIGNATURES**

# **FULL NAME OF THIRD INVENTOR:**

Gary	J	Lucas	
(Given Name)	(Middle Initial or Name)	(Family or Last Name)	
Sam	1. Luco	December 17 , 1999	
Anventor's Signature		(Date)	

Country of Citizenship: <u>USA</u>

Residence: 6120 Hytrail Court North, Pine Springs (Washington County), Minnesota 55115

Post Office Address: 6120 Hytrail Court North, Pine Springs (Washington County), Minnesota 55115